

**Department of Commerce,
Community and Economic
Development
FY23 Community Assistance Program**

**APPLICATION MUST BE SUBMITTED
NO LATER THAN JUNE 1, 2022**



**State of Alaska
Mike Dunleavy, Governor**

**Department of Commerce, Community,
and Economic Development
Julie Sande, Commissioner**

**Division of Community and Regional
Affairs
Sandra Moller, Director**

**FY 2023 COMMUNITY ASSISTANCE
PROGRAM REQUIREMENTS AND
CERTIFICATION NON-PROFIT APPLICATION**

DEADLINE: JUNE 1, 2022

NAME OF NON-PROFIT	CONTACT NAME
ADDRESS	CONTACT EMAIL ADDRESS
CITY, STATE, ZIP	CONTACT PHONE & FAX NUMBER

ACKNOWLEDGE THE REQUIREMENTS BY CHECKING OR INITIALING EACH BOX:

- ☐ The community assistance payment will be used only for a public purpose as required under AS 29.60.850(a) and the non-profit agrees to make available a service or facility with the funds under AS 29.60.855 – 29.60.879 to every person in the community.
- ☐ The non-profit must be in good standing with the Division of Corporations, Business and Professional Licensing. (<https://www.commerce.alaska.gov/web/cbpl/>)
- ☐ The non-profit will maintain, as required by 3 AAC 180.010 (4), all records relating to receipt and expenditure of a community assistance payment for at least three years, or longer if there is an unresolved audit finding, questioned costs, litigation or a grievance.
- ☐ A statement of expenditures of the prior year's community assistance payment and a budget form for current year's application.

CERTIFICATION:

As the highest ranking official, I certify _____ understands the
(Name of Non-Profit)
requirements for receiving the community assistance payment and agrees to comply with the laws and
regulations governing the community assistance funds.

Signature

Date

Printed Name and Title

FY 2023 COMMUNITY ASSISTANCE PROGRAM PROPOSED CAP BUDGET

Name of Non-Profit

Please describe below how your organization proposes to use its estimated FY 2023 Community Assistance Program payment.

FUEL \$ _____

ELECTRICITY \$ _____

INSURANCE \$ _____

EDUCATION \$ _____

EMS \$ _____

WATER/SEWER \$ _____

PUBLIC SAFETY \$ _____

FIRE \$ _____

ROAD MAINTENANCE \$ _____

HARBORS \$ _____

HEALTH \$ _____

GENERAL ADMINISTRATION \$ _____

OTHER _____ \$ _____

OTHER _____ \$ _____

OTHER _____ \$ _____

FY 2023 ESTIMATED PAYMENT \$ _____

FY 2023 COMMUNITY ASSISTANCE PROGRAM
Statement of Expenditures for Prior Year Payment

Name of Non-Profit

Please detail below how your organization spent its FY 2022 Community Assistance Payment.

FUEL \$ _____

ELECTRICITY \$ _____

INSURANCE \$ _____

EDUCATION \$ _____

EMS \$ _____

WATER/SEWER \$ _____

PUBLIC SAFETY \$ _____

FIRE \$ _____

ROAD MAINTENANCE \$ _____

HARBORS \$ _____

HEALTH \$ _____

GENERAL ADMINISTRATION \$ _____

OTHER _____ \$ _____

OTHER _____ \$ _____

OTHER _____ \$ _____

OTHER _____ \$ _____

OTHER _____ \$ _____

SAVINGS/NOT SPENT \$ _____

FY 2022 TOTAL PAYMENT \$ _____

Instructions for FY 2023 Community Assistance Program Requirements and Certification
Non-Profit Application

The non-profit's requirements and certification application must be received no later than June 1, 2022. Please check or initial each box indicating your organization understands the requirement for receiving the community assistance payment. Be certain the form is signed and dated before submitting.

The requirements and certification form may be submitted by electronic mail received no later than 4:30PM on June 1st. This is the preferred method for receiving the form. Email forms to: caa@alaska.gov (See special instructions for submitting by email below.)

Community Assistance Program regulations (3 AAC 180) effective December 22, 2017, require all entities to submit a statement of expenditures of the prior year's community assistance payment and the budget for the current year's payment. A statement of expenditures form and budget form are provided.

Special Instruction for submitting by electronic mail

Emailed documents are submitted to: caa@alaska.gov

The subject line must include: Entity name –CAP Program – FY

Document Name Ex. "Moose Corporation – CAP – FY23 Application"

To mail: DCCED DCRA CAA, PO Box 110809, Juneau, AK 99811-0809

Fax: 907-465-4761

If there are questions concerning the Community Assistance Program, please contact Jean Mason at (907)465-5647 or email caa@alaska.com.

Statutes, regulations, and forms are available at:

<https://www.commerce.alaska.gov/web/dcra/GrantandFunding/CommunityRevenueSharing.aspx>